

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jun 03, 2002 8:00 am**  
**Secretary of State**

05-17-2002 90033 019 \*\*\*150.00

DOCUMENT # **Y48549**

1. Entity Name

E Bruce Billingsley PA

(NC) LW

DO NOT WRITE IN THIS SPACE

34435

2. Principal Place of Business  
1210 Millennium Pkwy3. Mailing Address  
1210 Millennium Pkwy

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Ste 1030

Ste 1030

City &amp; State

City &amp; State

Brandon FL 33511

Brandon FL 33511

Zip

Country

Zip

Country

4. FEI Number 59-3133056

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

E. Bruce Billingsley

Street Address (P.O. Box Number is Not Acceptable)

1210 Millennium Pkwy Ste 1030

City

Brandon

FL

Zip Code

33511

DO NOT WRITE  
IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so: ☐  
(See criteria on back)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D/P/S
NAME	E Bruce Billingsley
STREET ADDRESS	1210 Millennium Pkwy Ste 1030
CITY-ST-ZIP	Brandon FL 33511

TITLE	
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CITY-ST-ZIP	

DO NOT WRITE  
IN THIS SPACE

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: *E. Bruce Billingsley*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-29-02 813-654-8916

CR2E034B (12/01)